MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

CC	OMO TEXTILE	27220022-O	UTLE	TS 1 & 2
1.	MONTH OF JANUARY 1, 2009 THRU JANUARY 31, 2009	9		
2.	Is Outlet # (8 digit) Correct?	(y)	N	N/A
3.	Is average Total flow-gal.day stated in space provided? 13 14 15 16	Y	N	N/A
4.	Is max. Total flow-gal day stated in space provided?		N	N/A
5.	Is method used to calculate water stated 2nd input		N	N/A
6.	Are number of working days stated?		N	N/A
7.	Are there any parameters which have exceeded PVSC Local Limits?	Y		N/A
8.	Is proper compliance/non-compliance statement provided?	Y	N	N/A
9.	Have correct number of samples been submitted?	(\mathbf{y})	N	N/A
10.	Has PHC result been listed on MR-1 report?	Y	N	N/A
11.	Has sample number been reported in space provided?	Y	N	N/A
12.	Have all regulated parameters been listed on MR-1?	Y	N	N/A
13.	Has sample type been stated on MR-1?	Q	N	N/A
14.	Have all samples been taken during this reporting period?	Y	N	N/A
15.	Has NJDEPE certified lab been used?	Y	N	N/A
16.	Have analytical results been submitted on copies of Laboratory stationery?	Y	N	N/A
17.	Have results been written in space designated on MR-1?	Y	N	N/A
18.	Is correct method used to preserve samples stated on MR-1	? (Y)	N	N/A
19.	Has MR-1 been signed by authorized representative?	(Y)	N	N/A
20.	Has information been submitted on proper MR-1 form?	Y	N	N/A
21.	Remove Arsenic from report if sampling not required	Y	N	(N/A)

MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

COMO TEXTILE	2	7220022			
First Reviewer: commer	nts on deficiencies <u>c</u>	OMPLETE			
				······································	·
Date Reviewed 3/13/0	Date sent to user	<u> </u>			···
Date due back	Reviewe	er c.Y.m.			
Second review commen	ts on deficiencies				
<u>-</u>					
Date Reviewed	Date s	ent to user		94.	
Date due back	Review	/er			
Date	Reviewer	· · ·	*		-

CHIVIN

PRETREATMENT MONITORING REPORT

				111				
NAME:COM	O TEXTILE PRINTS INC.				FFB 2	0 2009		
MAILING ADDR	MAILING ADDRESS: 191 EAST RAILWAY AVE. PATERSON, NJ 07503							
FACILITY LOCA	FACILITY LOCATION: 191 EAST RAILWAY AVENUE PATERSON, NJ 07503							
CATEGORY & SUBPART: 410 OUTLET #: 1								
		TEL D						
	CIAL: MICHAEL BLANCHF					0		
NEW CUSTOME	R ID / OUTLET ID: <u>27220022</u>	-1 OLD OU	TLET DESIGN.	ATION: $\underline{2}$	7400341			
MONIT	ORING PERIOD		Averag	ge	Maximun	<u>1</u>		
Start	End	0 1 1 1 1 1	111 ×1	<u> </u>				
1/1/09	1 21 69 1	Regulated Flow-g	gal/day	<u>~</u>				
1 1 0		Fotal Flow-gal/da	18 18 18 18 18 18 18 18 18 18 18 18 18 1	2709	20	7 140		
MO DAY YR	MO DAY YR	Total I low gas at	.,	, , , , ,		1110		
Method Used: /	13109 MO DAY YR Lowthly meter worked	read	JUNGS C	87058	ed 60	1		
down	wareed							
	~ · · · ·				J			
Production Rate (i	f applicable)							
PARAMETER		MASSO	R CONCENTR	ATION		T CALMY E MY PE		
FARAMETER		MON AVG	MAXIMUM		# OF SAMPLES	SAMPLE TYPE COMP/GRAB		
	Sample Measurement	0.088		Ng/e	SAIVII LES			
Cu	Permit Requirement	3,02		me/2		Comp		
06	Sample Measurement	0.013		mg/2	1	 		
PB	Permit Requirement	0,54		w/g/e		Comp		
41	Sample Measurement	0.008		mg/l				
Wi	Permit Requirement	5.9		NGIL		Comp		
70	Sample Measurement	1.14		wg/e				
10	Permit Requirement	1.67		m9/2	2019592	Cowo		
	Sample Measurement			11/12	222121012			
	Permit Requirement			/0	业	6		
	Sample Measurement			6		16/		
	Permit Requirement			100 M				
	Sample Measurement		• • •	9	MR 2009	- K3		
	Permit Requirement			E73		8		
	Sample Measurement			/60	and Input Ladustrial Dept.	137		
	Permit Requirement			162	Man	9/		
	Sample Measurement			13	119			
	Permit Requirement			_	060680			
	Danie pro 1/10 do da Grino in	05578970						
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	Permit Requirement	0 1	(5)					
	Sample Measurement	1 3000	- 20 - 20 - 20 - 20 - 20 - 20 - 20 - 20		. /			
	Permit Requirement	In made	24			1//		
	Sample Measurement	12 Hours	3/					
	Permit Requirement	MATTHEWA	7			11		
	Sample Measurement	010						
	Permit Requirement	01122233						
	Sample Measurement							
	Permit Requirement							

PRETREATMENT MONITORING REPORT FEB 2 0 2009 Certification of Non-Use if applicable (use additional sheets): We have been certified for Non-Use for Alary Compliance or non compliance statement with compliance schedule (use additional sheets if necessary) for every parameter used: We are in Compliance of the local limits) on Cay Pb. Wi, Zu Explain Method for preserving samples: Samples were taken and Stored at 4 degrees centificated. Nitrace Acid was used to preserve the Samples Acid was used to preserve the Samples I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering
Certification of Non-Use if applicable (use additional sheets): We have been certified for Non-use for Cl. Cr. Hy Compliance or non compliance statement with compliance schedule (use additional sheets if necessary) for every parameter used: We are in Compliance of the local limits) on Cay Pby Ni, Zu Explain Method for preserving samples: Samples were taken and Stored at 4 degrees centiquade. Nitro Acid was used to preserve the Samples at less than pt 2.0 I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted.
Explain Method for preserving samples: Samples were taken and Stored at 4 degrees centiquade. Nitric Acid was used to preserve The Samples at less Than pt 2.0 I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted
Explain Method for preserving samples: Samples were taken and Stored at 4 degrees centiquade. Nitric Acid was used to preserve The Samples at less Than pt 2.0 I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted.
Stored at 4 degrees Centiquode. Nitric Acid was used to preserve the Samples at less than p H 2.0 I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted.
I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted.
accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitt
·
Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering
the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete.
I am aware that there are significant penalties for submitting false information, including the possibility of
fine and imprisonment for knowing violations.
403.6(a)(2)(ii) revised by 53 FR 40610, October 17, 1988 Signature of Principal Executive or Authorized Agent
H / Michael F. Blanchfield
President

Type Name and Title

PVSC FORM MR-1 REV: 5 3/91 P 2

PRETREATMENT MONITORING REPORT FEB 2 0 2009 NAME: COMO TEXTILE PRINTS INC. MAILING ADDRESS: 191 EAST RAILWAY AVE. PATERSON, NJ 07503 FACILITY LOCATION: 191 EAST RAILWAY AVENUE PATERSON, NJ 07503 CATEGORY & SUBPART: 410 OUTLET#: 2 CONTACT OFFICIAL: MICHAEL BLANCHFIELD TELEPHONE: 973 279-2950 NEW CUSTOMER ID / OUTLET ID: 27220022 - 2 OLD OUTLET DESIGNATION: 27400342 MONITORING PERIOD Start End Regulated Flow-gal/day Total Flow-gal/day MO DAY YR DAY Method Used: Morte worked Production Rate (if applicable) PARAMETER MASS OR CONCENTRATION #OF SAMPLE TYPE MON AVG MAXIMUM 0.789 3:02 SAMPLES UNITS COMP/GRAB Sample Measurement Permit Requirement Sample Measurement 0.035 Permit Requirement Sample Measurement 40.004 Permit Requirement Sample Measurement Permit Requirement Sample Measurement

PVSC FORM MR-1 REV: 4 6/87 P 3

Permit Requirement

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PRETREATI	VI 10.13 I IVI 1313	1111411314	REPLIE
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Certification of Non-Use i	f applicable (use additional sho	eets): We hav	E Dee	JERCELANT Ed
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parameter used: we	are in Con	pliance o	t The	local
(ctimil	on CarPs.	WiZn		
	<u> </u>		•	<u> </u>
Explain Method for preserv	ving samples: Sawk	les were t	alien	and
Stored a	+ 4 degree	c cention	~de 1	litric
Acid was	s used to p	eserve t	l. a. C.	olec
1, test 60	The second popular	^	~e 50	-m(3(C)
a1 1653	Than PH 2	.0		
I certify under penalty	of law that this document an	d attachments were prep	ared under m	y direction or supervision in
accordance with a system	designed to assure that quali	fied personnel properly g	ather and eva	luate the information subm
	e person or persons who man			•
	nation submitted is, to the be			
	significant penalties for subn			
	•	ntting laise information,	mending the	possibility of
fine and imprisonment for	knowing violations.			
403.6(a)(2)(ii) revised b	y 53 FR 40610, October 17, 1	988		
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- H	Signature f Executive or Au		•	
11				•
	Michael F. Blanch	lia P'A		
•		grecu		
-	Wee President			
	Type Name	/-		
; 	2//9	/2004		
	/ Date/			•

PVSC FORM MR-1 REV: 5 3/91 P 2

Technion, Inc. Testing and Research Laboratories

Client: Como Textiles

Date Received: 01/06/09

Date Digested: 01/12/09

Test Results

Sample ID: Pretreatment 1

Matrix: Wastewater

Lab ID: 8398-2

Dil. Factor: 1

Date Analyzed	Parameter	Results	MDL	Local Avge Limits	EPA Method
01/13/09	Copper	0.088	0.004	3.02	200.8
01/13/09	Lead	0.013	0.004	0.54	200.8
01/13/09	Nickel	0.008	0.004	5.9	200.8
01/13/09	Zinc	1.14	0.01	1.67	200.8

QC ID: L2877371-2

Test results are in mg/l (ppm), unless specified.

MDL: Minimum Detection Limit

N.D.: Not Detected

NJDEP No. 07004

Page

3 of 5

Technion Inc., Testing and Research Laboratories

Client: Como Textiles

Date Received: 01/06/09

Date Digested: 01/12/09

Test Results

Sample ID: Pretreatment 2

Matrix: Wastewater

Lab ID: 8398-4

Dil. Factor: 1

Date Analyzed	Parameter	Results	MDL	Local Avge Limits	EPA Method
01/13/09	Copper	0.789	0.004	3.02	200.8
01/13/09	Lead	0.035	0.004	0.54	200.8
01/13/09	Nickel	N.D.	0.004	5.9	200.8
01/13/09	Zinc	0.157	0.01	1.67	200.8

QC ID: L2877371-3

Test results are in mg/l (ppm), unless specified.

MDL: Minimum Detection Limit

N.D.: Not Detected

NJDEP No. 07004

Page

5 of 5

COMO TEXTILE PRINTS, INC. 191 East Railway Avenue Paterson, New Jersey 07503 tel: (973) 279-2950 fax: (973) 881-8450

Date: 2/19/2009

Passaic Valley Sewerage Commissioners Industrial Waste Control Department

RE: Computations for monitoring report

Enclosed are the computations for the enclosed monitoring report:

reput c:		
Service #341		
Meter #70025607	3,904,560	gal
Meter #60094686 80 (CCF) * 748 =	59,840	gal
	3,964,400	gal
5% allowance for evaporation	* .95	
Consumption #341	3,766,180	gal
Service #342		
Meter #60094678 460 (CCF) * 748 =	344,080	gal.
5% allowance for evaporation	* . 95	
Consumption #342	326,876	gal.
Service #343		
Meter #45141583 // (CCF) * 748 =	8,228	gal.
Sanitary only #343	8,288	gal.
Michael Blanchfield President	pvs	3C36A

Technion Inc.,
Testing and Research Laboratories
263 Hillside Avenue
Nutley, NJ 07110

RECEIVED JAN 2 1 2009

Fax: 973-661-1817

Analytical Report

Client: Como Textiles

Client Ref:

Tel: 973-661-0800

Material: Four Wastewater Samples

Date: 01/15/09

Technion Ref: 8398

Date Received: 01/06/09

Lab ID: 09: 8398

Project:

Analysis Req: BOD, TSS, pH / Metals (Cu, Pb, Ni, Zn)

Analyst: Y. Yildiz, S. Zalewski

The above sample(s) were received on 01/06/09 and analyzed as requested.

Certificate of Analysis

Test Results: Test results are as attached.

Metals Subcontracted to QC Laboratories NELAP NJ PA166

Release of the date contained in this hard copy data package has been authorized by the laboratory manager as verified by the following signature.

Omar Baturay

Laboratory Manager

OB/td

NJDEP No. 07004

Page

1 of 5

LAB I.D. #

NO. OF SAMPLE CONTAINERS

CHAIN OF CUSTODY

TESTING AND RESEARCH LABORATORY

263 HILLSIDE AVENUE

TECHNION, INC.

REMARKS Page __ of ___ Time TRANSPORTED AT 4° C? H \square YES \square NO SAMPLES IN GOOD CONDITION? \square YES \square NO Date CHKOL Received by (Signature): REMARKS: TRANSPORTED AT 4°C? Time Date Received by (Signature): $\overline{\mathcal{L}}$ D × SAMPLE DESCRIPTION Time Time Hartwater CHECK REPORT TYPE REQUIRED -4-09 Date Date EPA TIER II (CLP) RESULTS ONLY III EPA TIER I (CLP) NJ TIER 18 NJ ECRA II DATE DUE NY DOH OTHER Received by (Signature): Received by (Signature): 6000 TIME Ş DATE Como trothe D Time Time 6-0 Date Date Prefrictment # 1 Pret reatment Company Name / Address: SAMPLE 1.D. authof # uished by (Signafure) ished by (Signature). Sampler (Signature): Outlet # Proj. Description Proj. Mgr.

Tel: (973) 661-0800 • Fax: (973) 661 -1817

NUTLEY, NEW JERSEY 07110

LAB I.D. # OF |

CHAIN OF CUSTODY

TESTING AND RESEARCH LABORATORY

TECHNION, INC.

REMARKS Time Page __ of __ 9 0 0 0 Date TRANSPORTED AT 4°C? 4 LTYES SAMPLES IN GOOD CONDITION? LTYES NO. OF SAMPLE CONTAINERS Received by (Signature): REMARKS: TRANSPORTED AT 4°C? Time Date Received by (Signature): SAMPLE DESCRIPTION Time Time Wastelyloter CHECK REPORT TYPE REQUIRED Date Date RESULTS ONLY III EPA TIER I (CLP) EPA TIER II (CLP) NJ ECRA II NU TIER 18 DATE DUE NY DOH OTHER Received by (Signature): Received by (Signature): TIME 1.30 1.30 1309 DATE Time Time Sultal omo Date Date Company Name / Address: SAMPLE I.D. Relinquished by (Signature): Relinquished by (Signature): Sampler (Signature): Proj. Description Proj. Mgr.

Tel: (973) 661-0800 • Fax: (973) 661 -1817

NUTLEY, NEW JERSEY 07110

263 HILLSIDE AVENUE



Passaic Valley Water Commission P.O. Box 11393 Newark, New Jersey 07101-4393 973-340-4300 877-772-7077

RECEIVED FEB 1 3 2009

Page 1 of 1

Bill Date	Jan 30, 2009
Account Number	122621-98572
Date of Last Payment	Dec 23, 2008
Amount of Last Payment	\$ 13,251.00
Previous Balance	\$ 1,967.02
Current Charges	\$ 7,206.54
	Mary New York (1997)
Total Amount Due	\$ 9,173.56
Due Date	Mar 01, 2009

SERVICE ADDRESS 191 E RAILWAY AVE, PATERSON

BILL TYPE MONTHLY BILL

Billing Period

Dec 10, 2008--Jan 22, 2009

Services

Description	 Charge
SERVICE CHARGE	172.73
SERVICE CHARGE	199.64
USAGE CHARGE (CCF)	3721.98
FIRST 333 CCF	236.81
NEXT 9,999,999 CCF	2875.38
• •	

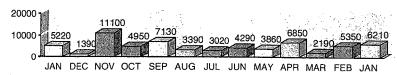
Meters

Meter No 70025607

Meter Size 4 INCH Current Previous 9601 9079

Consumption

Usage History (most recent first)



Message Center

Passaic Valley Water Commission found high levels of lead in drinking water in some homes. Lead can cause serious health problems. For more information please call Passaic Valley Water Commission or visit www.pvwc.com THIS BILL REFLECTS A RATE INCREASE EFFECTIVE JANUARY 1, 2009.

DETACH HERE AND RETURN LOWER PORTION WITH YOUR CHECK OR MONEY ORDER



Passaic Valley Water Commission P.O. Box 11393 Newark, New Jersey 07101-4393 973-340-4300

RECEIVED FEB 1 3 2009

Mailing Address:

□ To change mailing address check here and fill out back of form. Please include account number on check or money order. Make check or money order payable to PVWC.

'Account Number	122621-98572
Due Date	Mar 01, 2009
Total Amount Due	\$ 9,173.56
Amount Enclosed	

Service Address:

191 E RAILWAY AVE, PATERSON

PASSAIC VALLEY WATER COMMISSION PO BOX 11393 NEWARK NJ 07101-4393

000122621000098572000009173567

Passaic Valley Water Commission P.O. Box 11393 Newark, New Jersey 07101-4393 973-340-4300 877-772-7077

RECEIVED FEB 2 - 2009

Page 1 of 1

Bill Date	Jan 30, 2009
Account Number	122623-98574
Date of Last Payment	Dec 30, 2008
Amount of Last Payment	\$ 611.72
Previous Balance	\$ 7.45
Current Charges	\$ 757.80
Total Amount Due	\$ 765.25
Due Date	Mar 01, 2009

SERVICE ADDRESS <u>191 E RAILWAY AVE UT001, PATERSON</u>

BILL TYPE **MONTHLY BILI**

Billing Period

Dec 10, 2008--Jan 22, 2009

Services

Charge
54.39
63.88
327.99
236.81
74.73

Meters

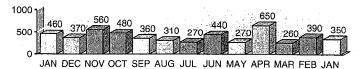
Meter No 60094678

Meter Size 2 INCH

Current Previous 5068 5022

Consumption

Usage History (most recent first)



Message Center

Passaic Valley Water Commission found high levels of lead in drinking water in some homes. Lead can cause serious health problems. For more information please call Passaic Valley Water Commission or visit www.pvwc.com THIS BILL REFLECTS A RATE INCREASE EFFECTIVE JANUARY 1, 2009.

DETACH HERE AND RETURN LOWER PORTION WITH YOUR CHECK OR MONEY ORDER



Passaic Valley Water Commission P.O. Box 11393 Newark, New Jersey 07101-4393 973-340-4300

RECEIVED FEB 2 - 2009

Mailing Address:

*A-01-RZW-AM-00754

<u>գլիկժգիտովիկուսիգովիլոիկիկիլումիլուկիլուիի</u> COMO TEXTILE PRINT

191 E RAILWAY AVE PATERSON NJ 07503-2100



☐ To change mailing address check here and fill out back of form. Please include account number on check or money order. Make check or money order payable to PVWC.

Account Number	122623-98574
Due Date	Mar 01, 2009
Total Amount Due	\$ 765.25
Amount Enclosed	

Service Address:

191 E RAILWAY AVE UT001, PATERSON

PASSAIC VALLEY WATER COMMISSION PO BOX 11393 NEWARK NJ 07101-4393 Madadaddaaddaadhia

000122623000098574000000765252



Passaic Valley Water Commission P.O. Box 11393 Newark, New Jersey 07101-4393 973-340-4300 877-772-7077 Page 1 of 2

Bill Date	Feb 06, 2009
Account Number	122625-98578
Date of Last Payment	Feb 03, 2009
Amount of Last Payment	\$ 244.74
Previous Balance	\$-0.50
Current Charges	\$ 268.82
Total Amount Due	\$ 268.32
Due Date	Mar 08, 2009

SERVICE ADDRESS 193 E RAILWAY AVE, PATERSON

BILL TYPE MONTHLY BILL

Billing Period

Dec 10, 2008--Jan 22, 2009

Services

Charge
54.39
63.88
12.97
7.98
64.88
64.72

Meters

Meter No	Meter Size	Current	Previous	Consumption
60094686	2 INCH	1310	1302	80
45141583	5/8 INCH	549	538	11

continued...

DETACH HERE AND RETURN LOWER PORTION WITH YOUR CHECK OR MONEY ORDER



Mailing Address:

Passaic Valley Water Commission P.O. Box 11393 Newark, New Jersey 07101-4393 973-340-4300 □ To change mailing address check here and fill out back of form. Please include account number on check or money order. Make check or money order payable to PVWC.

Account Number	122625-98578
Due Date	Mar 08, 2009
Total Amount Due	\$ 268.32
Amount Enclosed	

Service Address:

193 E RAILWAY AVE, PATERSON

*B-01-YQ2-AM-00046

COMO TEXTILES 193 E RAILWAY AVE PATERSON NJ 07503

PASSAIC VALLEY WATER COMMISSION
PO BOX 11393
NEWARK NJ 07101-4393

TROP DOWN BOX

NON USE CERTIFICATION MONITORING REPORT LOCAL LIMITS

		FACALI	للاللا	2				
NAME com	NO TEXTILE	OMERATOR CONTROL OF THE CONTROL OF T	'	-			AND AND DESCRIPTION OF THE PARTY OF THE PART	
MAILING ADD	DRESS:							
FACILITY LOC	CATION:			A CONTROL OF THE PROPERTY OF T	•			
CATEGORY &	SUBPARTPE	ERMIT #		. 0	ITT FT # S	777008	9-1+2	
CONTACT OFF			,					
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	thorized to certify non-		THE REAL PROPERTY.	CHARLES THE RESERVE THE PARTY OF THE PARTY O				
	Lead				SAMPL	EDAIL.	· / ·	
Cadmium	Мегсигу		MONTH DAY YEAR					
Chromium	Molybdenum		Ì			09		
	Nickel				, , , , , , , , , , , , , , , , , , , ,			
PARAMETER								
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			EXCEEDED YES OR NO					
	Sample Measurement	0.008			m9/1		<i>^</i>	
NICKEL	Threshold Value	0.02			1		Comp.	
	Sample Measurement	1		,				
* OUT. # 1 *	Threshold Value	1						
	Sample Measurement							
	Threshold Value					-		
	Sample Measurement	10.004		E	majl			
nickel	Threshold Value	0.02	03	456	1	· c	omp.	
	Sample Measurement	/6		93678970				
* OUT. #2 *	Threshold Value	18	1	03		213 4.757	6772	
	Sample Measurement	/32		2009	3 /00		- O.	
	Threshold Value	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	MAP)	Input	3 00 1	7	02	
	Sample Measurement	150	ACIUS	trial Dept	10	MAR 200	9 22	
	Threshold Value		15555	20261814	10	Industrial D	iont	
	Sample Measurement	A		200	1/3/		-0100	
	Threshold Value					2829 305	100	
	Sample Measurement							
	Threshold Value							

PVSC Form MR-3 10/96